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APPLICANTS

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** CONTINUING DATA *****
None
AL

** FOREIGN APPLICATIONS *****
None
AL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 4	TOTAL CLAIMS 64	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance AL	Verified and Acknowledged	Examiner's Signature AL	Initials	

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TITLE

IBOX WITH HOME DELIVERY AUTO-RECEIPT SYSTEM

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